| Effective January 1, 2003   |  |   |                                  |                                  |                            |                  |        |           |          |                        |          |                     |                        |
|---|--|---|----------------------------------|----------------------------------|----------------------------|------------------|--------|-----------|----------|------------------------|----------|---------------------|------------------------|
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY   |  |   |                                  |                                  |                            |                  |        |           |          |                        |          |                     |                        |
| TOTAL CLAIMS  |  |   | 10                               |                                  |                            |                  |        | RATE      |          | FEE                    |          | RATE                | FEE                    |
| FOR .   |  |   | NUMBER FILED                     |                                  | NUMBER EXTRA               |                  |        | BASIC     |          | 375.00                 | OB       | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | ( minus 20=                      |                                  | • ~                        |                  |        | X\$ 9=    |          |                        |          | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | ( minus 3 =                      |                                  | •                          |                  |        | X42=      |          |                        | OR       | X84=                |                        |
| ML  | ILTIPLE DEPEN                                  | IDENT CLAIM P                             | RESENT                           |                                  |                            |                  |        |           |          |                        | OR       |                     |                        |
| * 15  | the difference                                 | in column 1 is                            | less than zero, enter "0" in col |                                  |                            | oduma 3          |        | +140=     |          |                        | OR       | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                                  |                                  |                            |                  |        | TOTA      | L        |                        | OR       | TOTAL               | 70                     |
| CLAIMS AS AMENDED - PART II  Column 1) (Column 2) (Column 3)  |  |   |                                  |                                  |                            |                  | i      | SMAL      | LL E     | NTITY                  | OR       | OTHER<br>SMALL      |                        |
| AMENDMENT A   |  | REMAINING I                               |                                  | HIGH<br>NUME<br>PREVIO<br>PAID I | BER PRESENT<br>DUSLY EXTRA |                  |        | RATE      | =        | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
| NDN   | Total  | ·10                                       | Minus                            | ** 0                             | 00                         | = ()             |        | X\$ 9:    | =        |                        | OR       | X\$18=              | \ /                    |
| AME   | Independent                                    | *   | Minus ***                        |                                  | 3                          | =                |        | X42=      | .        |                        | OR       | X84=                | V                      |
| <b>L</b> _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                  |                                  |                            |                  |        | +140:     | _        | -                      | OR       | +280=               | $\Lambda$              |
|   |  |   |                                  |                                  |                            |                  |        | TOT       |          |                        |          | TOTAL<br>ADDIT, FEE |                        |
| ADDIT. FEE (Column 1) (Column 2) (Column 3)   |  |   |                                  |                                  |                            |                  |        |           |          |                        |          | ADUIT. PER          |                        |
| MENOMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                  | HIGH<br>NUMI<br>PREVIO<br>PAID   | BER                        | PRESENT<br>EXTRA |        | RATE      |          | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
| Š   | Total  | *   | Minus                            | **                               |                            | =                |        | X\$ 9=    | =        |                        | OR       | X\$18=              |                        |
| AME   | Independent                                    | *   | Minus                            | CNIDENT                          | CLANA                      |                  | ┨┃     | X42=      |          |                        | OR       | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                                  |                                  |                            |                  |        | +140=     | -        |                        | OR       | +280=               |                        |
| •   |  |   |                                  |                                  |                            |                  |        |           | AL<br>EE |                        | OR       | TOTAL<br>ADDIT, FEE |                        |
| _   |  | (Column 1)                                |                                  | (Colun                           |                            | (Column 3)       |        |           |          |                        |          |                     |                        |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                  | NUME<br>PREVIO<br>PAID I         | BER                        | PRESENT<br>EXTRA |        | RATE      |          | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus                            | ##                               |                            | =                |        | X\$ 9=    |          |                        | OR       | X\$18=              |                        |
| AME   | Independent                                    | *   | Minus                            | ***                              |                            | -                |        | X42=      | 1        |                        | OR       | X84=                |                        |
| <b>L</b>  | rinoi PHESE                                    | NTATION OF M                              | JUINUE DEF                       | DEPENDENT C                      |                            |                  | 1      |           | +        |                        |          |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid Foo" IN THIS SPACE is less than the entry in COLUMN 3.   |  |   |                                  |                                  |                            |                  |        |           |          |                        |          |                     |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                                  |                                  |                            |                  |        |           |          |                        |          |                     |                        |
|   | THE DIGNEST NUM                                | iber Previously Pai                       | o ror (Total or                  | Independe                        | ent) is the                | nighest numbe    | er fou | nd in the | app      | ropriate box           | t in col | lumn 1.             | ٠                      |

**Application or Docket Number**